Schedule E)	FOR SE OF FORM 24/48				
NAME OF COMMITTEE (In Full) The 2016 Committee	FEC IDENTIFICATION NUMBER ▼				
The 2016 Committee	C C00569905				
	M - M / D - D / Y - Y - Y - Y				
Check if X 24-hour report 48-hour report New report Amends report file					
Full Name of Payee CAMPAIGN FUNDING DIRECT	Date of Public Distribution/Dissemination				
Mailing Address 1420 SPRING HILL ROAD, SUITE 490	10 21 2016				
SUITE 490	Amount				
City State Zip Code	1503.83				
MCLEAN VA 22102-3028	Transaction ID : SE24.93414 Date of Disbursement or Obligation				
Purpose of Expenditure CONSULTING - DIRECT MAIL Category/ Type 004	10 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
Name of Federal Candidate Support Offic	e Sought: House District:				
TRUMP, DONALD, , ,	President Senate State:				
Calendar Year-To-Date Per Election for Office Sought Distriction 1008076.56	oursement For: Primary General Other (specify)				
Full Name of Payee	Date of Public Distribution/Dissemination				
CAMPAIGN FUNDING DIRECT	10 21 2016				
Mailing Address 1420 SPRING HILL ROAD, SUITE 490					
SUITE 490	Amount				
City State Zip Code	1503.82				
MCLEAN VA 22102-3028	Transaction ID: SE24.93415 Date of Disbursement or Obligation				
Purpose of Expenditure CONSULTING - DIRECT MAIL Category/ Type 004	10 21 / 2016				
Name of Federal Candidate Support Office	ce Sought: House District:				
CLINTON, HILLARY, , ,	President Senate State:				
Calendar Year-To-Date Per Election for Office Sought Disk 201	oursement For: Primary General Other (specify)				
(a) SUBTOTAL of Itemized Independent Expenditures	3007.65				
(b) SUBTOTAL of Unitemized Independent Expenditures					
(c) TOTAL Independent Expenditures					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
	10 22 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
Signature					

ooneddic Ly	FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
The 2016 Committee	C C00569905
Check if X 24-hour report 48-hour report New report Amends report filed on	M = M / D = D / Y = Y = Y = Y
Full Name of Payee	ate of Public Distribution/Dissemination
CHOCKLETT PRESS	10 / 21 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 2922 NICHOLAS AVE	mount
City State Zip Code	1001.93
ROANOKE VA 24012 Tr.	ansaction ID : SE24.93416 ate of Disbursement or Obligation
Purpose of Expenditure DIRECT MAIL - POSTAGE Category/ Type 004	10 21 2016
Name of Federal Candidate Support Office So	ought: House District:
TRUMP, DONALD, , , Oppose Pre	esident Senate State:
Calendar Year-To-Date Per Election for Office Sought Disburser 2016	ment For: Primary General
	Other (specify)
Full Name of Payee CHOCKLETT PRESS	ate of Public Distribution/Dissemination
Mailing Address 2922 NICHOLAS AVE	10 21 2016 mount
City State Zip Code	1001.93
	ansaction ID : SE24.93417 ate of Disbursement or Obligation
Purpose of Expenditure DIRECT MAIL - POSTAGE Category/ Type 004	10 / 21 / 2016
Name of Federal Candidate Support Office Sc	ought: House District:
CLINTON, HILLARY, , ,	esident Senate State:
Calendar Year-To-Date Per Election for Office Sought Disburser 2016	ment For:
(a) SUBTOTAL of Itemized Independent Expenditures	2003.86
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not made with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or party committee) any political party committee or its agent.	
Frank, Robert, , , [Electronically Filed] Date 10	22 2016
Signature	

PAGE 2

OF

Schedule E)	FOR SE OF FORM 24/48				
AME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼				
The 2016 Committee	C C00569905				
	M M / D D / Y Y Y Y				
check if X 24-hour report 48-hour report New report Amends report filed					
Full Name of Payee ECG DATA CENTER	Date of Public Distribution/Dissemination				
Mailing Address 1420 SPRING HILL ROAD SUITE 490	10 21 2016				
SUITE 490	Amount				
City State Zip Code	2568.76				
MCLEAN VA 22102-3028	Transaction ID : SE24.93418 Date of Disbursement or Obligation				
Purpose of Expenditure LIST RENTAL EXPENSE Category/ Type 004	10 / 21 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
Name of Federal Candidate Support Office	e Sought: House District:				
TRUMP, DONALD, , , Oppose	President Senate State:				
Calendar Year-To-Date Per Election for Office Sought Disbut 2016	other (specify) ►				
Full Name of Payee	Date of Public Distribution/Dissemination				
ECG DATA CENTER	10 21 2016				
Mailing Address 1420 SPRING HILL ROAD SUITE 490	Amount				
SUITE 490					
City State Zip Code MCLEAN VA 22102-3028	2568.76 Transaction ID : SE24.93419				
Diviness of Evansitive	Date of Disbursement or Obligation				
LIST RENTAL EXPENSE Category/ Type 004	10 21 / 2016				
	e Sought: House District:				
CLINTON, HILLARY, , ,	President Senate State:				
Calendar Year-To-Date Per Election for Office Sought Disbut 2016	ursement For: Primary General Other (specify)				
(a) SUBTOTAL of Itemized Independent Expenditures	5137.52				
(b) SUBTOTAL of Unitemized Independent Expenditures					
(c) TOTAL Independent Expenditures					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
	0 22 2016				
Signature					

	chedule E)	ENDENT EXICED	ITOTIES		PAGE 4 OF 21 FOR SE OF FORM 24/48	
	ME OF COMMITTEE (In Full)			F	EC IDENTIFICATION NUMBER ▼	
I	he 2016 Committee				C C00569905	
Ch	eck if 24-hour report 48-hour	report New report	ort Amends repo	rt filed on	M / D = D / Y = Y = Y	
	Full Name of Payee			Date of	Public Distribution/Dissemination	
	ECG DATA CENTER			M	M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
	Mailing Address 1420 SPRING HILL RO SUITE 490	OAD SUITE 490		Amoun	t	
	City	State	Zip Code		294.72	
	MCLEAN	VA	22102-3028		ction ID : SE24.93420 Disbursement or Obligation	
	Purpose of Expenditure DIRECT MAIL - POSTAGE		Category/ Type 004	M	10 / 21 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
	Name of Federal Candidate		x Support	Office Sought:	House District:	
	TRUMP, DONALD, , ,		Oppose	✗ Presider		
	Calendar Year-To-Date Per Election for Office Sought		1008076.56	Disbursement 2016 Oth	For: Primary X General ner (specify) ▶	
	Full Name of Payee			Date of	f Public Distribution/Dissemination	
	ECG DATA CENTER				10 21 2016	
	Mailing Address 1420 SPRING HILL	ROAD SUITE 490		Amoun		
	SUITE 490			Amoun		
	City	State	Zip Code		294.72	
	MCLEAN	VA	22102-3028		tion ID : SE24.93421 f Disbursement or Obligation	
	Purpose of Expenditure DIRECT MAIL - POSTAGE		Category/ Type 004		0 21 2016	
	Name of Federal Candidate		Support	Office Sought:	House District:	
	CLINTON, HILLARY, , ,		x Oppose	✗ Presider	nt Senate State:	
	Calendar Year-To-Date Per Election for Office Sought	7	1008076.56	Disbursement 2016 Oth	For: Primary General Per (specify) ■	
	(a) SUBTOTAL of Itemized Independent	Expenditures			589.44	
	(b) SUBTOTAL of Unitemized Independent	ent Expenditures				
	(c) TOTAL Independent Expenditures			•	7	
	Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
	Frank, Robert, , , Signature	[Electron	ically Filed] Date	10 /	22 / 2016	
	3					

Sc	chedule E)		1101120		PAGE 5 OF 21 FOR SE OF FORM 24/48
	ME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
TI	he 2016 Committee				C C00569905
Che	eck if X 24-hour report 48-hour	r report X New repo	ort Amends repo		- M / D - D / Y - Y - Y
_	E. II Name of David				<u></u>
	Full Name of Payee FEDERAL EXPRESS			M	of Public Distribution/Dissemination 10 21 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Ì	Mailing Address 3875 AIRWAYS BLVD			Amour	nt
	P.O. BOX 371462				
Ì	City MEMPHIS	State TN	Zip Code 38116-5070		8.08 action ID : SE24.93422 of Disbursement or Obligation
Ī	Purpose of Expenditure POSTAGE		Category/ Type 004	М	of Disbursement or Obligation
Ì	Name of Federal Candidate		✗ Support	Office Sought	t: House District:
	TRUMP, DONALD, , ,		Oppose	✗ Preside	
	Calendar Year-To-Date Per Election for Office Sought	7 7	1008076.56	Disbursement 2016 Ot	t For: Primary X General ther (specify) ▶
	Full Name of Payee FEDERAL EXPRESS				of Public Distribution/Dissemination
	Mailing Address 3875 AIRWAYS BLV	/D		Amour	nt
	P.O. BOX 371462				
	City MEMPHIS	State TN	Zip Code 38116-5070		8.07 ction ID : SE24.93423 of Disbursement or Obligation
	Purpose of Expenditure POSTAGE		Category/ Type 004	M	10 21 2016
Ì	Name of Federal Candidate		Support	Office Sought	t: House District:
	CLINTON, HILLARY, , ,		x Oppose	x Preside	ent Senate State:
	Calendar Year-To-Date Per Election for Office Sought		1008076.56	Disbursement 2016 Of	t For:
((a) SUBTOTAL of Itemized Independent	Expenditures			16.15
((b) SUBTOTAL of Unitemized Independent	ent Expenditures		· •	7 1 7 1 7
((c) TOTAL Independent Expenditures			· •	7
٧	Under penalty of perjury I certify that the with, or at the request or suggestion of, a party committee) any political party comm	any candidate or authorized			
	Frank, Robert, , ,	[Electron	nically Filed] Date	e 10	22 2016
	Signature				

Schedule E)	VDEIVI EXI EIVE	TIONES		PAGE 6 OF 21 FOR SE OF FORM 24/48			
NAME OF COMMITTEE (In Full)			FEC ID	ENTIFICATION NUMBER ▼			
The 2016 Committee	C	C00569905					
Check if 24-hour report 48-hour rep	heck if X 24-hour report 48-hour report New report Amends report filed on						
Full Name of Payee INTERNATIONAL DATA MAN	NAGEMENT, INC	D.	M = M /	Distribution/Dissemination			
Mailing Address 490 WHITE POND DRIVE			Amount	21 2016			
City	State	Zip Code		464.90			
AKRON	OH	44320-1122		464.89 D: SE24.93424 rsement or Obligation			
Purpose of Expenditure DIRECT MAIL - POSTAGE		Category/ Type 004	10	21 / 2016			
Name of Federal Candidate		x Support	Office Sought:	House District:			
TRUMP, DONALD, , ,		Oppose	✗ President	Senate State:			
Calendar Year-To-Date Per Election for Office Sought		1008076.56	Disbursement For: 2016 Other (sp	Primary ✗ General ecify) ▶			
Full Name of Payee INTERNATIONAL DATA MANA	GEMENT, INC.		M = M /	Distribution/Dissemination			
Mailing Address 490 WHITE POND DRIV	E		Amount	21 2016			
City	State	Zip Code		464.89			
AKRON	ОН	44320-1122	Transaction ID Date of Disbu				
Purpose of Expenditure DIRECT MAIL - POSTAGE		Category/ Type 004	10	21 / 2016			
Name of Federal Candidate		Support	Office Sought:	House District:			
CLINTON, HILLARY, , ,		X Oppose	✗ President	Senate State:			
Calendar Year-To-Date Per Election for Office Sought		1008076.56	Disbursement For: 2016 Other (sp	Primary General Decify) ■			
(a) SUBTOTAL of Itemized Independent Exp	penditures			929.78			
(b) SUBTOTAL of Uniternized Independent	Expenditures						
,				4			
(c) TOTAL Independent Expenditures			•	7			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.							
Frank, Robert, , , Signature	[Electron	nically Filed] Date	10 / 22	2016			

Schedule E)	PAGE 7 OF 21 FOR SE OF FORM 24/48				
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼				
The 2016 Committee	C C00569905				
Check if 24-hour report 48-hour report New report Amends rep	ort filed on				
Full Name of Payee	Date of Public Distribution/Dissemination				
OMEGA LÍST COMPANY	10 / 21 / 2016				
Mailing Address 1420 SPRING HILL ROAD	Amount				
SUITE 490					
City State Zip Code MCLEAN VA 22102-3028	590.10 Transaction ID : SE24.93426				
	Date of Disbursement or Obligation				
Purpose of Expenditure LIST RENTAL EXPENSE Category/ Type 004	10 / 21 / 2016				
Name of Federal Candidate Support	Office Sought: House District:				
TRUMP, DONALD, , , Oppose	President Senate State:				
Calendar Year-To-Date Per Election for Office Sought 1008076.56	Disbursement For: Primary Seneral 2016				
	Other (specify) -				
Full Name of Payee OMEGA LIST COMPANY	Date of Public Distribution/Dissemination				
Mailing Address 1420 SPRING HILL ROAD					
SUITE 490	Amount				
City State Zip Code	590.10				
MCLEAN VA 22102-3028	Transaction ID : SE24.93427 Date of Disbursement or Obligation				
Purpose of Expenditure LIST RENTAL EXPENSE Category/ Type 004	10 / 21 / Y Y Y Y Y				
Name of Federal Candidate Support	Office Sought: House District:				
FRANK, ROBERT, , ,	President Senate State:				
Calendar Year-To-Date Per Election for Office Sought 1008076.56	Disbursement For: Primary General 2016				
	Other (specify) -				
(a) SUBTOTAL of Itemized Independent Expenditures	▶ 1180.20				
(b) SUBTOTAL of Unitemized Independent Expenditures	··· >				
	7 7 7				
(c) TOTAL Independent Expenditures	··· >				
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Frank, Robert, , , [Electronically Filed] Date	e 10 22 2016				
Signature					

Schedule E)	II EXI END	1101120		PAGE 8 OF 21 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
The 2016 Committee				C C00569905
Check if 24-hour report 48-hour report	New rep	port Amends rep		= M / D = D / Y = Y = Y
Full Name of Payee PARAMOUNT COMMUNICATION	 S			of Public Distribution/Dissemination
Mailing Address 525-K EAST MARKET ST SUITE 114			Amou	10 21 2016 nt
City	State	Zip Code		2124.83
LEESBURG	VA	20176		action ID : SE24.93428 of Disbursement or Obligation
Purpose of Expenditure EMAIL COMMUNICATIONS		Category/ Type 004		10 21 / 2016
Name of Federal Candidate		✗ Support	Office Sough	t: House District:
TRUMP, DONALD, , ,		Oppose	x Preside	ent Senate State:
Calendar Year-To-Date Per Election for Office Sought	7	1008076.56	Disbursemen 2016	rt For: Primary X General wither (specify) ▶
Full Name of Payee				of Public Distribution/Dissemination
PARAMOUNT COMMUNICATIONS				10 21 2016
Mailing Address 525-K EAST MARKET ST			Amau	
SUITE 114			Amou	int
City LEESBURG	State VA	Zip Code 20176		2124.82 action ID : SE24.93429 of Disbursement or Obligation
Purpose of Expenditure EMAIL COMMUNICATIONS		Category/ Type 004		10 / 21 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate		Support	Office Sough	nt: House District:
CLINTON, HILLARY, , ,		X Oppose	X Presid	
Calendar Year-To-Date Per Election for Office Sought	7	1008076.56	Disbursemer 2016	nt For: Primary X General Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditure	es		•	4249.65
(b) SUBTOTAL of Unitemized Independent Expendi	tures			7
(c) TOTAL Independent Expenditures			··· •	171171171
Under penalty of perjury I certify that the independ with, or at the request or suggestion of, any candid- party committee) any political party committee or its	ate or authorized			
Frank, Robert, , ,	[Electron	nically Filed] Da	te 10	22 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature				

Scl	hedule E)	TI CITE O		PAGE 9 OF 21 FOR SE OF FORM 24/48
	ME OF COMMITTEE (In Full)		FEC I	DENTIFICATION NUMBER ▼
Th	ne 2016 Committee		C	C00569905
—— Che	eck if X 24-hour report 48-hour report X New report	port Amends repor	rt filed on	/ D = D / Y = Y = Y
_				
	Full Name of Payee PROGRESS PRINTING PLUS		Date of Publi	ic Distribution/Dissemination / 21
	Mailing Address 2677 WATERLICK ROAD		Amount	
\dagger	City State	Zip Code		1387.83
	LYNCHBURG VA	24502		ID: SE24.93432 ursement or Obligation
	Purpose of Expenditure DIRECT MAIL - POSTAGE	Category/ Type 004	10	21 2016
T	Name of Federal Candidate	x Support	Office Sought:	House District:
	TRUMP, DONALD, , ,	Oppose	x President	Senate State:
	Calendar Year-To-Date Per Election for Office Sought	1008076.56	Disbursement For: 2016 Other (s	Primary ✗ General pecify) ▶
	Full Name of Payee PROGRESS PRINTING PLUS Mailing Address 2677 WATERLICK ROAD		Date of Publ	lic Distribution/Dissemination
-	City State	Zip Code	— I	1387.82
Ĺ	LYNCHBURG VA	24502		D: SE24.93433 oursement or Obligation
	Purpose of Expenditure DIRECT MAIL - POSTAGE	Category/ Type 004	10	21 2016
1	Name of Federal Candidate	Support	Office Sought:	House District:
	CLINTON, HILLARY, , ,	X Oppose	x President	Senate State:
	Calendar Year-To-Date Per Election for Office Sought	1008076.56	Disbursement For: 2016 Other (s	Primary X General specify) ▶
(6	a) SUBTOTAL of Itemized Independent Expenditures		•	2775.65
(I	b) SUBTOTAL of Unitemized Independent Expenditures		· •	
(0	c) TOTAL Independent Expenditures		•	4 4
W	Under penalty of perjury I certify that the independent expenditures with, or at the request or suggestion of, any candidate or authorized party committee) any political party committee or its agent.			
		nically Filed] Date	10 / 22	2016
	Signature			

Sc	chedule E)		1101120		PAGE 10 OF 21 FOR SE OF FORM 24/48
	ME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
T	he 2016 Committee				C C00569905
	eck if 24-hour report 48-hour	report New repo	ort Amends repo		* M / D * D / Y * Y * Y * Y
Т	Full Name of Payee			Date o	of Public Distribution/Dissemination
	RST MARKETING				10 21 2016
	Mailing Address 1272 CORPORATE PA	RK ROAD		Amour	nt
	City	State	Zip Code		1255.92
	FOREST	VA	24551-2277		action ID : SE24.93434 of Disbursement or Obligation
	Purpose of Expenditure DIRECT MAIL - POSTAGE		Category/ Type 004	М	10 21 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Ì	Name of Federal Candidate		x Support	Office Sought	t: House District:
	TRUMP, DONALD, , ,		Oppose	x Preside	
	Calendar Year-To-Date Per Election for Office Sought	,	1008076.56	Disbursement 2016 Ot	t For: Primary X General ther (specify) ▶
	Full Name of Payee RST MARKETING			M	of Public Distribution/Dissemination
	Mailing Address 1272 CORPORATE F	PARK ROAD		Amour	nt
Ì	City	State	Zip Code		1255.91
	FOREST	VA	24551-2277		ction ID : SE24.93435 of Disbursement or Obligation
	Purpose of Expenditure DIRECT MAIL - POSTAGE		Category/ Type 004		10 / 21 / 2016
Ì	Name of Federal Candidate		Support	Office Sought	t: House District:
	CLINTON, HILLARY, , ,		x Oppose	x Preside	ent Senate State:
	Calendar Year-To-Date Per Election for Office Sought		1008076.56	Disbursement 2016 Ot	t For: Primary
	(a) SUBTOTAL of Itemized Independent	Expenditures		• [2511.83
((b) SUBTOTAL of Unitemized Independe	ent Expenditures			
	(c) TOTAL Independent Expenditures			· •	
١	Under penalty of perjury I certify that the with, or at the request or suggestion of, a party committee) any political party comm	any candidate or authorized			
	Frank, Robert, , ,	[Electron	ically Filed] Date	e 10	22 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Signature				

Sc	chedule E)		1101120		PAGE 11 OF 21 FOR SE OF FORM 24/48
	ME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
Tł	he 2016 Committee				C C00569905
Che	eck if 24-hour report 48-hour r	report New repo	ort Amends repo		M / D D / Y Y Y Y Y
T	Full Name of Payee RST MARKETING				of Public Distribution/Dissemination
	Mailing Address 1272 CORPORATE PAR	DV DOAD			10 21 2016
	12/2 OOK OKATE I AL	KK KOAD		Amour	nt
	City	State	Zip Code		3409.33
	FOREST	VA	24551-2277		action ID : SE24.93436 of Disbursement or Obligation
	Purpose of Expenditure DIRECT MAIL - PRINTING		Category/ Type 004		10 21 / 2016
	Name of Federal Candidate		x Support	Office Sought	t: House District:
	TRUMP, DONALD, , ,		Oppose	x Preside	ent Senate State:
	Calendar Year-To-Date Per Election for Office Sought		1008076.56	Disbursement 2016 Ot	t For: Primary X General
	Full Name of Payee RST MARKETING				of Public Distribution/Dissemination
-	Mailing Address 1272 CORPORATE P	PARK ROAD		L	10 21 2016
				Amour	nt
	City	State	Zip Code		3409.32
-	FOREST	VA	24551-2277		ction ID : SE24.93437 of Disbursement or Obligation
	Purpose of Expenditure DIRECT MAIL - PRINTING		Category/ Type 004		10 21 / 2016
Ī	Name of Federal Candidate		Support	Office Sough	t: House District:
	CLINTON, HILLARY, , ,		X Oppose	✗ Preside	ent Senate State:
	Calendar Year-To-Date Per Election for Office Sought		1008076.56	Disbursement 2016 Of	t For: Primary
,	(-) CURTOTAL of Hamized Independent	E and it was			0440.05
((a) SUBTOTAL of Itemized Independent E	Expenditures		· ·	6818.65
((b) SUBTOTAL of Unitemized Independen	nt Expenditures		·· •	4
((c) TOTAL Independent Expenditures			·· •	7 1 7 1 7
٧	Under penalty of perjury I certify that the with, or at the request or suggestion of, a party committee) any political party comm	any candidate or authorized			
	Frank, Robert, , ,	[Electron	ically Filed] Date	e 10	22 2016
	Signature				

Schedu	le E)		1101120		PAGE 12 OF 21 FOR SE OF FORM 24/48
	F COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
The 20	016 Committee				C C00569905
Check if	24-hour report 48-hour report	X New rep	port Amends repo		M / D D / Y Y Y Y Y
Full N	lame of Payee VANNA COMMUNICATIONS	, LLC			of Public Distribution/Dissemination
Mailin	ng Address 755 SONNE DRIVE			Amou	10 21 2016 nt
City		State	Zip Code		2500.00
	APOLIS	MD	21041		action ID : SE24.93438 of Disbursement or Obligation
	ose of Expenditure ISULTING - ADVERTISING		Category/ Type 004	IV.	10 21 / 2016
Name	e of Federal Candidate		x Support	Office Sough	it: House District:
TRUM	MP, DONALD, , ,		Oppose	x Preside	
	Calendar Year-To-Date Per Election for Office Sought		1008076.56	Disbursemen 2016 O	tt For:
SAV	Name of Payee VANNA COMMUNICATIONS, L ng Address 755 SONNE DRIVE	LC ———			of Public Distribution/Dissemination 10
City		State	Zip Code		2500.00
	IAPOLIS	MD	21041		action ID : SE24.93439 of Disbursement or Obligation
	ose of Expenditure ISULTING - ADVERTISING		Category/ Type 004		10 21 2016
Name	e of Federal Candidate		Support	Office Sough	nt: House District:
CLIN	ITON, HILLARY, , ,		x Oppose	x Presid	
	Calendar Year-To-Date Per Election for Office Sought		1008076.56	Disbursemer 2016	nt For: Primary
(a) SU	JBTOTAL of Itemized Independent Expendent	itures		· ·	5000.00
(b) SU	JBTOTAL of Unitemized Independent Expe	enditures		·· •	
(c) TO	OTAL Independent Expenditures			··· • [
with, or	penalty of perjury I certify that the indeper at the request or suggestion of, any can committee) any political party committee or	didate or authorized			
	Frank, Robert, , ,	[Electron	nically Filed] Date	e 10 /	22 2016
Sigr	nature				

Schedul	le E)		1101120		PAGE 13 OF 21 FOR SE OF FORM 24/48
	COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
The 2016 Committee					C C00569905
Check if	X 24-hour report 48-hour report	rt New rep	port Amends repo		M / D D / Y D Y D Y
Full Na	ame of Payee VANNA COMMUNICATION	S, LLC			of Public Distribution/Dissemination
Mailing	g Address 755 SONNE DRIVE			Amou	10 21 2016 nt
City		State	Zip Code	<u> </u>	4062.50
	APOLIS	MD	21041		action ID : SE24.93440 of Disbursement or Obligation
	se of Expenditure RODUCTION		Category/ Type 004		10 21 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name	of Federal Candidate		✗ Support	Office Sough	t: House District:
TRUM	MP, DONALD, , ,		Oppose	✗ Preside	
	Calendar Year-To-Date Per Election for Office Sought		1008076.56	Disbursement 2016 Or	t For: Primary X General ther (specify) ▶
SAV	ame of Payee /ANNA COMMUNICATIONS, g Address 755 SONNE DRIVE	LLC			of Public Distribution/Dissemination 10
City		State	Zip Code		4062.50
	APOLIS	MD	21041		ction ID : SE24.93441 of Disbursement or Obligation
	se of Expenditure RODUCTION		Category/ Type 004		10 21 2016
Name	of Federal Candidate		Support	Office Sough	t: House District:
CLINT	TON, HILLARY, , ,		X Oppose	x Preside	ent Senate State:
	Calendar Year-To-Date Per Election for Office Sought	7 7	1008076.56	Disbursemen 2016	t For:
(a) SUE	BTOTAL of Itemized Independent Exper	nditures		. •	8125.00
(b) SUE	BTOTAL of Unitemized Independent Ex	penditures		·· •	
(c) TOT	TAL Independent Expenditures			•	7 1 7 1 7
with, or	penalty of perjury I certify that the inde at the request or suggestion of, any ca ommittee) any political party committee	andidate or authorized			
	Frank, Robert, , ,	[Electron	nically Filed] Date	e 10	22 2016
Signa	nature				

				FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)			FEC	IDENTIFICATION NUMBER ▼
The 2016 Committee			С	C00569905
Check if 24-hour report 48-	nour report	Amends report	filed on	/ D = D / Y = Y = Y
Full Name of Payee SAVANNA COMMUNIC	ATIONS II C		Date of Pul	olic Distribution/Dissemination
			10 N	/ 21 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 755 SONNE DRIV	E		Amount	
City	State Zip	Code		148281.50
ANNAPOLIS	MD 21	041		n ID : SE24.93442 bursement or Obligation
Purpose of Expenditure RADIO ADVERTISEMENTS	C	ategory/ Type 004	10	21 / 2016
Name of Federal Candidate		✗ Support	Office Sought:	House District:
TRUMP, DONALD, , ,		Oppose	✗ President	Senate State:
Calendar Year-To-Date Per Election for Office Sought	100		Disbursement For: 2016 Other (Primary X General
Full Name of Payee SAVANNA COMMUNICA	TIONS, LLC	·	Date of Pu	blic Distribution/Dissemination
Mailing Address 755 SONNE DR	IVE		10 Amount	21 2016
City	State Zip	Code		148281.50
ANNAPOLIS		1041		ID: SE24.93443 Sursement or Obligation
Purpose of Expenditure RADIO ADVERTISEMENTS	С	ategory/ Type 004	10 ^M	21 2016
Name of Federal Candidate		Support	Office Sought:	House District:
CLINTON, HILLARY, , ,		x Oppose	x President	Senate State:
Calendar Year-To-Date Per Election for Office Sought	100	08076.56	Disbursement For 2016 Other	: Primary X General (specify) ▶
(a) SUBTOTAL of Itemized Indepen	dent Expenditures		•	296563.00
(b) SUBTOTAL of Uniternized Indep	endent Expenditures		•	7 1 7 1 7
(c) TOTAL Independent Expenditure	S		.	7 7 7
Under penalty of perjury I certify the with, or at the request or suggestion party committee) any political party	of, any candidate or authorized co			
Frank, Robert, , ,	[Electronicali	ly Filed] Date	10 / 22	2 2016
Signature				

PAGE

OF

Sc	hedule E)	IXI LITE!	101120				PAGE 15 FOR SE OF FO	OF 21 RM 24/48
	ME OF COMMITTEE (In Full)					FEC II	DENTIFICATION I	
Τŀ	The 2016 Committee					С	C00569905	
Che	eck if X 24-hour report 48-hour report	X New repo	ort A	mends repo		/ = M	/ D D / Y	YYY
T	Full Name of Payee SISK FULFILLMENT SERVICES					M = N		- Y - Y - Y
ŀ	Mailing Address 1900 INDUSTRIAL PARK DR.				Amou	10 int	21	2016
ŀ	City St	tate	Zip Code					162.41
	FEDERALSBURG N	MD	21632-266	67			ID : SE24.93444 ursement or Oblig	
	Purpose of Expenditure DIRECT MAIL - PRINTING		Category Type			10 ^M	/ 21 Y	2016 Y
ı	Name of Federal Candidate		×	Support	Office Sough	nt:	House Distr	rict:
	TRUMP, DONALD, , ,			Oppose	x Presid	_	Senate Sta	ate:
	Calendar Year-To-Date Per Election for Office Sought		1008076.5	6	Disbursemer 2016		Primary [pecify) ▶	X General
	Full Name of Payee SISK FULFILLMENT SERVICES Mailing Address 1900 INDUSTRIAL PARK DR.					10	ic Distribution/Diss	semination 2016
-	City St	tate	Zip Code					162.40
	•	MD	21632-26	67			D: SE24.93445 ursement or Oblig	
	Purpose of Expenditure DIRECT MAIL - PRINTING		Category Type] [10 ^M	/ 21 Y	2016 Y
ľ	Name of Federal Candidate			Support	Office Soug	ht:	House Dist	rict:
	CLINTON, HILLARY, , ,		×	Oppose	X Presid	lent [Senate St	ate:
	Calendar Year-To-Date Per Election for Office Sought		1008076.5	6	Disbursement 2016		Primary pecify) ▶	X General
((a) SUBTOTAL of Itemized Independent Expenditures				· [· ·	1 1 7	324.81
((b) SUBTOTAL of Unitemized Independent Expenditures	÷			•		7	-
((c) TOTAL Independent Expenditures				•			
٧	Under penalty of perjury I certify that the independent e with, or at the request or suggestion of, any candidate of party committee) any political party committee or its age	or authorized						
	Frank, Robert, , ,	[Electroni	cally Filed]	Date	10 ×	22	2016	Y
	Signature							

FOR SE OF FORM 24/48 NAME OF COMMITTEE (In Full) FEC IDENTIFICATION NUMBER ▼ The 2016 Committee C00569905 Check if | X | 24-hour report X New report Amends report filed on 48-hour report Full Name of Payee Date of Public Distribution/Dissemination SISK FULFILLMENT SERVICES 2016 10 21 Mailing Address 1900 INDUSTRIAL PARK DR. Amount State Zip Code City 114.11 MD 21632-2667 Transaction ID: SE24.93446 **FEDERALSBURG** Date of Disbursement or Obligation Purpose of Expenditure Category/ **DIRECT MAIL - POSTAGE** 004 10 21 2016 Type Name of Federal Candidate Office Sought: **✗** Support House District: TRUMP, DONALD, , , Oppose President Senate State: Disbursement For: Primary **✗** General Calendar Year-To-Date 2016 1008076.56 Per Election for Office Sought Other (specify) ▶ Full Name of Payee Date of Public Distribution/Dissemination SISK FULFILLMENT SERVICES 2016 Mailing Address 1900 INDUSTRIAL PARK DR. Amount City State Zip Code 114.10 **FEDERALSBURG** MD Transaction ID: SE24.93447 21632-2667 Date of Disbursement or Obligation Purpose of Expenditure Category/ DIRECT MAIL - POSTAGE 004 2016 10 21 Type Name of Federal Candidate Support Office Sought: House District: CLINTON, HILLARY, , , X Oppose **X** President Senate State: . Disbursement For: Primary **✗** General Calendar Year-To-Date 2016 1008076.56 Per Election for Office Sought Other (specify) (a) SUBTOTAL of Itemized Independent Expenditures..... 228.21 (b) SUBTOTAL of Unitemized Independent Expenditures (c) TOTAL Independent Expenditures..... Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. Frank, Robert, , , [Electronically Filed] 10 22 2016 Date Signature

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OF

Schedule E)	ENDENT EXICED	ITOTILO		PAGE 17 OF 21 FOR SE OF FORM 24/48	
NAME OF COMMITTEE (In Full)			FEC ID	ENTIFICATION NUMBER ▼	
The 2016 Committee	C	C00569905			
Check if 24-hour report 48-hour	report New rep	ort Amends repo	rt filed on	D = D / Y = Y = Y	
Full Name of Payee THE PINKSTON GROUP			M = M /	Distribution/Dissemination	
Mailing Address PO BOX 373			10 Amount	21 2016	
City	Ctata	7in Code		500.00	
City FAIRFAX STATION	State VA	Zip Code 22039-0373		500.00 D : SE24.93430 rsement or Obligation	
Purpose of Expenditure WEBSITE MAINTENANCE		Category/ Type 004	10	21 / 2016	
Name of Federal Candidate		✗ Support	Office Sought:	House District:	
TRUMP, DONALD, , ,		Oppose	✗ President	Senate State:	
Calendar Year-To-Date Per Election for Office Sought		1008076.56	Disbursement For: 2016 Other (spe	Primary ✗ General ecify) ▶	
Full Name of Payee			Date of Public	Distribution/Dissemination	
THE PINKSTON GROUP			10	21 / 2016	
Mailing Address PO BOX 373			Amount		
City	State	Zip Code		500.00	
FAIRFAX STATION	VA	22039-0373	Transaction ID Date of Disbu	: SE24.93431 rsement or Obligation	
Purpose of Expenditure WEBSITE MAINTENANCE		Category/ Type 004	10	21 / 2016	
Name of Federal Candidate		Support	Office Sought:	House District:	
CLINTON, HILLARY, , ,		x Oppose	✗ President	Senate State:	
Calendar Year-To-Date Per Election for Office Sought		1008076.56	Disbursement For: 2016 Other (sp	Primary X General ecify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures					
(b) SUBTOTAL of Unitemized Independent	nt Expenditures		•	1 10 10 10	
(c) TOTAL Independent Expenditures			•		
Under penalty of perjury I certify that the with, or at the request or suggestion of, a party committee) any political party comm	ny candidate or authorized				
Frank, Robert, , ,	[Electron	ically Filed] Date	10 / 22	2016	
•					

S	chedule E)	LINDLINI LAI LINDI			PAGE 18 OF 21 FOR SE OF FORM 24/48
N/	AME OF COMMITTEE (In Full)			F	EC IDENTIFICATION NUMBER ▼
Т	he 2016 Committee				C C00569905
Ch	neck if 🗶 24-hour report 48-hour	report New report	ort Amends repo	ort filed on	M / D = D / Y = Y = Y
	Full Name of Payee USPS				Public Distribution/Dissemination
	Mailing Address 5874 MERLE HAY RD				0 21 2016
				Amount	
	City JOHNSTON	State IA	Zip Code 50131-8101		2820.00 ction ID : SE24.93448
	Purpose of Expenditure DIRECT MAIL - POSTAGE		Category/ Type 004	М	Disbursement or Obligation M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Name of Federal Candidate		Support	Office Sought:	House District:
	TRUMP, DONALD, , ,		Oppose	✗ Presiden	st Senate State:
	Calendar Year-To-Date Per Election for Office Sought		1008076.56	Disbursement 2016 Oth	For: Primary X General er (specify) ▶
	Full Name of Payee USPS			М	Public Distribution/Dissemination D
	Mailing Address 5874 MERLE HAY R	RD		Amount	لىننى لىا ك
	City	State	Zip Code		2820.00
	JOHNSTON	IA	50131-8101		tion ID : SE24.93449 Disbursement or Obligation
	Purpose of Expenditure DIRECT MAIL - POSTAGE		Category/ Type 004		0 21 2016
	Name of Federal Candidate		Support	Office Sought:	House District:
	CLINTON, HILLARY, , ,		x Oppose	x Presider	nt Senate State:
	Calendar Year-To-Date Per Election for Office Sought		1008076.56	Disbursement 2016 Oth	For: Primary X General ner (specify) ▶
	(a) SUBTOTAL of Itemized Independent	Expenditures		· • ·	5640.00
	(b) SUBTOTAL of Unitemized Independent	ent Expenditures		.	
	(c) TOTAL Independent Expenditures			·- }	7 7 7
	Under penalty of perjury I certify that the with, or at the request or suggestion of, party committee) any political party committee.	any candidate or authorized			
	Frank, Robert, , ,	[Electron	ically Filed] Date	4.6	22 2016
	Signature				

Schedule E)	PAGE 19 OF 21 FOR SE OF FORM 24/48				
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼				
The 2016 Committee C C00569905					
Check if 24-hour report 48-hour report New report Ame	nends report filed on				
Full Name of Payee WASHINGTON INTELLIGENCE BUREAU	Date of Public Distribution/Dissemination				
Mailing Address 4128 PEPSI PLACE	10 21 2016 Amount				
City State Zip Code CHANTILLY VA 20151-1501	894.96 Transaction ID : SE24.93450				
Purpose of Expenditure Category/	Date of Disbursement or Obligation 004 Date of Disbursement or Obligation 21 2016				
Name of Fodoral Condidate	Support Office Sought: House District:				
TRUMP DONALD	Oppose				
Calendar Year-To-Date Per Election for Office Sought 1008076.56	Disbursement For: Primary ★ General 2016 Other (specify) ▶				
Full Name of Payee WASHINGTON INTELLIGENCE BUREAU	Date of Public Distribution/Dissemination 10 21 2016				
Mailing Address 4128 PEPSI PLACE	Amount				
City State Zip Code CHANTILLY VA 20151-1501	894.96 1 Transaction ID : SE24.93451				
Purpose of Expenditure DIRECT MAIL - FULFILLMENT Category/ Type	Date of Disbursement or Obligation 004 Date of Disbursement or Obligation 21 2016				
	Support Office Sought: House District:				
	Oppose				
Calendar Year-To-Date Per Election for Office Sought 1008076.56	Disbursement For: Primary General 2016 Other (specify) ▶				
(a) SUBTOTAL of Itemized Independent Expenditures	1789.92				
(b) SUBTOTAL of Unitemized Independent Expenditures					
(c) TOTAL Independent Expenditures)				
Under penalty of perjury I certify that the independent expenditures reported her with, or at the request or suggestion of, any candidate or authorized committee of party committee) any political party committee or its agent.					
Frank, Robert, , , [Electronically Filed] Signature	Date 10 / 22 / 2016				

	medule L)	FOR SE OF FORM 24/48
	ME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
I	he 2016 Committee	C C00569905
Ch	eck if 24-hour report 48-hour report New report Amends report filed	on M M / D D / Y Y Y Y Y
	Full Name of Payee	Date of Public Distribution/Dissemination
	WASHINGTON INTELLIGENCE BUREAU	10 21 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Mailing Address 4128 PEPSI PLACE	Amount
	City State Zip Code	2644.17
	CHANTILLY VA 20151-1501	Transaction ID : SE24.93452 Date of Disbursement or Obligation
	Purpose of Expenditure BOOKKEEPING Category/ Type 004	M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Name of Federal Candidate Support Office	e Sought: House District:
	TRUMP DONALD	President Senate State:
	Calendar Year-To-Date Per Election for Office Sought Disbut	
		Other (specify) -
	Full Name of Payee WASHINGTON INTELLIGENCE BUREAU	Date of Public Distribution/Dissemination
	Mailing Address 4128 PEPSI PLACE	10 21 2016 Amount
	City State Zip Code	2644.16
	CHANTILLY VA 20151-1501	Transaction ID : SE24.93453 Date of Disbursement or Obligation
	Purpose of Expenditure BOOKKEEPING Category/ Type 004	10 21 2016
	Name of Federal Candidate Support Office	e Sought: House District:
		President Senate State:
	Calendar Year-To-Date Per Election for Office Sought Disbut 2016	ursement For: Primary General Other (specify) Other (specify) ✓
	(a) SUBTOTAL of Itemized Independent Expenditures	5288.33
	(b) SUBTOTAL of Unitemized Independent Expenditures	
	(c) TOTAL Independent Expenditures	
	Under penalty of perjury I certify that the independent expenditures reported herein were not may with, or at the request or suggestion of, any candidate or authorized committee or agent of eithe party committee) any political party committee or its agent.	
	(F) 4 ' 11 F'1 11	0 22 2016
	Signature	
_		

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	FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
The 2016 Committee	C C00569905
Check if 24-hour report 48-hour report New report Amends report	ort filed on
Full Name of Payee	Date of Public Distribution/Dissemination
ZIP MAILING SERVICES, INC.	10 21 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 6304 SHERIFF RD. STE Z STE Z	Amount
City State Zip Code	1247.65
LANDOVER MD 20785-4361	Transaction ID : SE24.93456 Date of Disbursement or Obligation
Purpose of Expenditure DIRECT MAIL - SHIPPING Category/ Type 004	M M / D D / Y Y Y Y
Name of Federal Candidate X Support	Office Sought: House District:
TRUMP, DONALD, , , Oppose	🗶 President Senate State:
Calendar Year-To-Date Per Election for Office Sought 1008076.56	Disbursement For: Primary 2016
Full Name of Payee	
ZIP MAILING SERVICES, INC.	Date of Public Distribution/Dissemination
Mailing Address 6304 SHERIFF RD. STE Z	Amount
STE Z	4047.00
City State Zip Code LANDOVER MD 20785-4361	1247.63 Transaction ID : SE24.93457 Date of Disbursement or Obligation
Purpose of Expenditure DIRECT MAIL - SHIPPING Category/ Type 004	M M / D D / Y Y Y Y
Name of Federal Candidate Support	Office Sought: House District:
CLINTON, HILLARY, , ,	🗶 President Senate State:
Calendar Year-To-Date Per Election for Office Sought 1008076.56	Disbursement For: Primary General 2016
(a) SUBTOTAL of Itemized Independent Expenditures	> 2495.28
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	355674.93
Under penalty of perjury I certify that the independent expenditures reported herein were with, or at the request or suggestion of, any candidate or authorized committee or agent of party committee) any political party committee or its agent.	
Frank, Robert, , , [Electronically Filed] Date	e 10 22 2016
Signature	

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